

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2006 8:00 am
Secretary of State

03-30-2006 90033 013 ***150.00

DOCUMENT # J73961

1. Entity Name

ISLAND BEACH COMPANY, INC.



Principal Place of Business

P O BOX 855
SANIBEL FL 33957

Mailing Address

1986 MY TERN CT
SANIBEL FL 33957



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2808278

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/05)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOREY, HARTLEY D.
1986 MY-TERN CT
SANIBEL FL 33957

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Hartley D. Morey PRES.

3/24/06

DATE

FILE NOW!!! FEE IS \$150.00.

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete

NAME MOREY, HARTLEY
STREET ADDRESS 1986 MY-TERN CT
CITY-ST-ZIP SANIBEL FL

TITLE SD ☐ Delete

NAME MOREY, ANNE
STREET ADDRESS 1986 MY-TERN CT
CITY-ST-ZIP SANIBEL FL

TITLE TD ☐ Delete

NAME DIPRETE, ANN
STREET ADDRESS 10 GROVE ST
CITY-ST-ZIP SANDWICH MA

TITLE VP ☐ Delete

NAME GERLACH, RICHARD
STREET ADDRESS 1826 ARDSLEY WAY
CITY-ST-ZIP SANIBEL FL 33957

TITLE VP ☐ Delete

NAME GERLACH, ELIZABETH
STREET ADDRESS 1826 ARDSLEY WAY
CITY-ST-ZIP SANIBEL FL 33957

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS 1986 MY TERN CT
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS 1986 MY TERN CT
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Hartley D. Morey PRES
HARTLEY D. MOREY PRES

3/24/06

239-472-3272

Date

Daytime Phone #